

a health insurance bill be introduced in the Legislature.

The desirability of insuring against the direct and indirect cost of sickness is admitted by all. The disagreements come when details are discussed. As a result, employers oppose it, fearing the addition to the cost of doing business. Employees too, object to the cost. They furthermore object to its being compulsory, without being universally so. They state that it might interfere with their fights for higher wages. They fear that once the State embarks on the principle of meddling in the purely personal affairs of wage-workers, there will be no limit to the meddling. They fear that if industry be made to share the burden, it would lead to examination of employees and rejection of the physically imperfect. They consider the unemployment question vastly more important.

Insurance men oppose, and will continue to oppose, any health insurance measure, until assured that they will be permitted to write such insurance. They opposed Workmen's Compensation in the same manner. It is fairly certain that the Commission will recommend the exclusion of companies run for profit from the health insurance field. The reasons for and against cannot be discussed here. There is a great deal to be said on either side of the question.

Fraternal and similar bodies were not very well represented at the Commission's hearings. They know, from foreign precedents, that if they live up to the standard requirements, they have no reason to fear any curtailment of their present rights and powers, under any health insurance scheme.

The medical profession of this State had no opinion to express at the hearings, i. e., no opinion that could be considered official. This, it is true, applied to the other various elements concerned. Organized labor in California has not yet gone officially on record, and the American Federation of Labor is at present trying to arouse its members to the need for work along the lines of social endeavor. Employers, too, know little about these new things. Those of the profession who attended the hearings (and there were several who attended all of them) and testified, did so in a purely personal way. Our county societies have not studied the problem long enough; they will no doubt ere long have more or less definite views; their delegates will be instructed accordingly, and at Coronado, we will in April have a full discussion.

It is up to the profession to work out that part of any health insurance measure that concerns itself. If the profession feels that it is satisfied with present conditions, it can say so. But if it thinks that with 34 States taking up industrial accident insurance in a few short years, it is not unlikely that the people sooner or later will want health insurance, then let the profession decide upon the terms under which it will serve.

In next month's issue, we will attempt to give some of the arguments pro and con, the various points *sub judice*, as well as facts and figures at hand, which are of importance in discussions of proposed measures.

R. B.

## DOCTORS' INCOMES.

Remarkable statements are constantly being made relative to the incomes of physicians. At the recent hearings of the Social Insurance Commission, a labor man stated that the organized labor man probably averaged \$1000 per year—doctors less. He seemed to attribute this to lack of organization and fiercer competition. No authentic figures have ever been presented to us, as to incomes of physicians in the United States. In California, fees are much higher than in the east. If they are high, they should not be lowered by health insurance acts. If they do not afford adequate incomes to the profession, insurance acts should try to improve the situation. Over 1000 cards have been received in reply to the postals recently sent out in an effort to get data on this topic. Have you sent in yours? If not, please do so at once! The more replies, the more accurate the statistics. Please do it—NOW.

R. B.

## ALCOHOL.

Very recently spirituous liquors have been banished from the National Guard of California. This is in line with the current course of events the world over. The warring nations of Europe have banished liquors from the fighting forces in the field. France, Russia and England have by decree banished alcoholic beverages from common use.

A majority of the States have gone dry in this country, and it does not require much astuteness to foresee universal prohibition for the United States of America.

This is not an argument for prohibition or for temperance, but a brief reference to the rapid progress of current events leading up to universal discard of alcohol as a food, medicine, or beverage.

Scientific investigation has demonstrated beyond question that alcohol is not a food, that it lowers temperature, and decreases the mental and physical power in ratio to the amount consumed.

The knowledge is worldwide, that alcoholic beverages are absolutely prohibited to Arctic explorers or Arctic workers. Alcohol, ethyl alcohol, is the potent blend in all beverages, from champagne down to steam beer.

The change that has taken place in the medical profession in regard to the use of alcohol as a medicine, and the abuse of it as a beverage, is so marked that it occurs to the writer that a brief calling attention to it, in the JOURNAL, which is the mouthpiece of the thought and action of the profession, is proper and necessary.

It is largely due to the scientific investigation of our profession that the great universal change is taking place.

Making a note of the change, and recording it, is not an argument for or against the loss of business to the manufacturer and salesman of alcohol as a beverage. Much can be said pro and con, and we leave it to others to say it.